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16 SEP 22 AM 9:39
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS

SEP 26 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Home Change, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Scott M. Wellikoff

Name of Person

Wellikoff Law, P.A.

Firm/Company

19638 Estuary Drive

Address

Boca Raton, FL 33498

City/State and Zip code

swellikoff@wellikofflaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Wellikoff

Name of Person

at (917) 816-5058

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

15 SEP 22 AM 9:39

STATE
SECRET
OFFICE

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Home Change, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3. 81-3874370

(FEI number, if applicable)

4. September 1, 2016

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. None

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 7380 W. Sand Lake Road, Suite 500, Orlando, FL 32819

(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Scott M. Wellikoff

Office Address: 19638 Estuary Drive

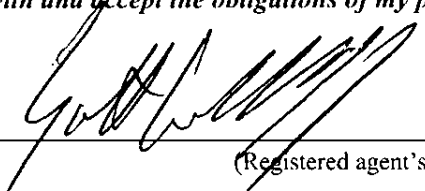
Boca Raton, Florida 33498

(City)

(Zip code)

9. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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SECRETARY OF STATE
FLORIDA
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SEP 22 2016

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Scott M. Wellikoff

Address: 19638 Estuary Drive, Boca Raton, FL 33498

Director: _____

Address: _____

B. OFFICERS

President: PLEASE SEE ADDENDUM

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Scott Wellikoff, Director _____

(Typed or printed name and capacity of person signing application)

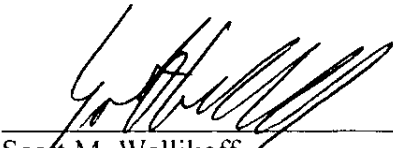
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FLORIDA

ADDENDUM TO HOME CHANGE, INC.'S
APPLICATION BY FOREIGN BUSINESS CORPORATION FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA

11.B. Officers

- Chief Operating Officer: Tamela Staubs
 - o Address: 7380 W. Sand Lake Road, Suite 500, Orlando, Florida 32819

Date: September 16, 2016



Scott M. Wellikoff
as Director of Home Change, Inc.

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SECRETARY
TALLAHASSEE

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOME CHANGE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2016.

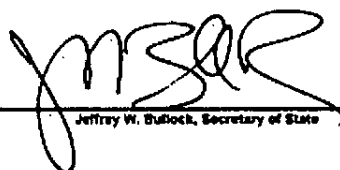
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOME CHANGE, INC." WAS INCORPORATED ON THE FIRST DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

16 SEP 22 AM 9:39
SECRETARY OF STATE
J. BULLOCK




Jeffrey W. Bullock, Secretary of State

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SR# 20165772782

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202987299

Date: 09-14-16